

North Central Accountable Community of Health 200 Valley Mall Pkwy East Wenatchee, WA 98802

North Central Accountable Community of Health:

Enclosed is the organization's 2018 Exempt Organization return. The return should be signed, dated, and mailed.

Specific filing instructions are as follows.

FORM 990 RETURN:

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Please sign and mail on or before November 15, 2019.

Mail to: Department of the Treasury Internal Revenue Service Center Ogden, UT 84201-0027

A copy of the return is enclosed for your files. By signing this return as a representative of this entity you attest, to the best of your knowledge, the information presented in the return is complete and accurate. We recommend you retain this copy indefinitely.

Best regards,

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Sean M. Patton, CPA

PO Box 3068 175 E. Penny Rd. Suite 1 Wenatchee, WA 98807-3068

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Form		

### Extended to November 15, 2019 Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service ► Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.



AF	or the	2018 calendar year, or tax year beginning and	ending				
Вc	heck if	C Name of organization		D Employer identifie	cation number		
а		North Central Accountable					
	Addres:	Community of Health					
Ĺ.	]Name ]change	Doing business as		82-1	626178		
	nitial  return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	r		
	]Final ]return/	200 Valley Mall Pkwy		509-	886-6438		
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	19,845,299.		
	Amendi return	ed East Wenatchee, WA 98802	H(a) Is this a group re	eturn			
X	]Applica ]tion	F Name and address of principal officer: Linda Evans Parlett	:e	for subordinates	?		
	pending	200 Valley Mall Parkway, East Wenatchee		H(b) Are all subordinates in			
ΠĨ	ax-exe	mpt status: X 501(c)(3) 501(c)( )◀ (insert no.) 4947(a)(1) c	or 📃 527	If "No," attach a	list. (see instructions)		
JV	Vebsite	e: > www.ncach.org		H(c) Group exemptio	n number 🕨		
KF	orm of	organization; X Corporation Trust Association Other ►	L Year	of formation: 2017 N	A State of legal domicile: WA		
Pa	irt I	Summary					
	1 8	Briefly describe the organization's mission or most significant activities: $[ { m The} ~ { m r} ]$	nissic	on of NCACH :	is to		
Governance	-	improve the health of the North Central R	egion	's communiti	es and the		
,nai	2 (	Check this box 🕨 🛄 if the organization discontinued its operations or dispos	sed of more	than 25% of its net as	sets.		
Vel		· · · · · · · · · · · · · · · · · · ·		3	18		
ğ	4 1	Number of independent voting members of the governing body (Part VI, line 1b)		4	18		
8 8		Total number of individuals employed in calendar year 2018 (Part V, line 2a)		0			
<i>i</i> tie		fotal number of volunteers (estimate if necessary)		0			
Activities &	7 a 1	Fotal unrelated business revenue from Part VIII, column (C), line 12	Part VIII, column (C), line 12				
<		Net unrelated business taxable income from Form 990-T, line 38			0.		
				Prior Year	Current Year		
đ	8 (	Contributions and grants (Part VIII, line 1h)		6,000,000.	19,738,982.		
'n	9 F	Program service revenue (Part VIII, line 2g)		0.	0.		
Revenue	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		21,138.	98,147.		
£	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	8,170.		
	12 7	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,021,138.	19,845,299.		
	13 (	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.		
	14 E	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
ល	15 8	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.		
nse	16a F	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.		
Expenses	b 7	Fotal fundraising expenses (Part IX, column (D), line 25) 🛛 🕨	0.				
Щ	17 (	Dther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		77,771.	7,755,281.		
	18 1	Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		77,771.	7,755,281.		
-		Revenue less expenses. Subtract line 18 from line 12		5,943,367.	12,090,018.		
10%			В	eginning of Current Year	End of Year		
Assets	20 1	Fotal assets (Part X, line 16)	L	5,943,367.	18,033,385.		
t As		Fotal liabilities (Part X, line 26)		0.	0.		
ING		Net assets or fund balances. Subtract line 21% from line 20		5,943,367.	18,033,385.		
Pa	art II	Signature Block					

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer Linda Evans Parlette, Executive Director Type or print name and title	Date							
Paid Preparer Use Only	Print/Type preparer's nameFreparer's signatureSean M. Patton, CPAFirm's nameFirm's nameCordell, Neher & Company, P.L.L.C.Firm's addressP.O. Box 3068	Date         Check         PTIN           9/30/19         If         P00461275           Firm's EIN ►         91-0950793							
	Wenatchee, WA 98807-3068	Phone no. (509) 663-1661							
May the If	May the IRS discuss this return with the preparer shown above? (see instructions)								
832001 12-3	1-18 LHA For Paperwork Reduction Act Notice, see the separate instructions.	Form <b>990</b> (2018)							

See Schedule O for Organization Mission Statement Continuation

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	North Central Accountable
	1990 (2018) Community of Health 82–1626178 Page t III Statement of Program Service Accomplishments
I GI	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
1	The mission of NCACH is to improve the health of the North Central
	region's communities and the people who live in them, improve health
	care access, quality, the experience of care, and lower per capita
	health care costs in the North Central region which includes Chelan,
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
40	revenue, if any, for each program service reported. (Code: ) (Expenses \$ 7,016,283 . including grants of \$ ) (Revenue \$
44	NCACH works with local community leaders focused on health, policy, and
	data-driven approaches to improving the health of its region as part of
	the state's Healthier Washington Medicaid Transformation. NCACH uses
	these collaborative partnerships and innovative solutions to implement
	strategies and projects with partners across the region and develop
	venues for training and sharing best practices. These strategies and
	projects are managed by regional NCACH workgroups that develop targeted
	approaches that our community partners engage in.
4b	
40	(Code:) (Expenses \$ including grants of \$ ) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	
	(Expenses \$ including grants of \$ ) (Revenue \$ )
<u>4e</u>	Total program service expenses 7,016,283.

North Central Accountable

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Part IV         Checklist of Required Schedulas         Yes           1         Is the organization desched in sector 501(s) or 4947(s)(1) (other than a private foundation)?         1         X           2         Is the organization negation for the Mindo policities arrangian activities on babiliti of or in opposition to candidulito for private foundation?         1         X           2         Is the organization negation for the Mindo policities arrangian activities on have a section 501(s) organization.         3         X           3         Is the organization negation for the Mindo policities (Is private activities, or have a section 501(s) organization.         4         X           4         Bector 501(s) (IS privation activities on the mind the bability of or an instance of the policities on the distribution or investment of numbers in such funds on account?         1/1/1, w         5         X           6         Did the organization means in ordination the instance induce C, Part II         8         X         7         X           7         Did the organization means in ordination or investment of numbers in such funds in posterions of partial Prives, complete Schedule D, Part II         9         X           7         X         8         Did the organization means in anound in Part X, Into 21, for encome on catodial account liability, serve as a custodian for mounts not blackling base in the store private or anound in Part X, Into 21, for encome in eactobal account liability, serve as a custodian for mounts not bl		990 (2018) Community of Health 82-1626	178	P	age <b>3</b>
1         Inter organization described in section 501(c)(c) or 4847(q)(t) (obtor than a private foundation)?         1         X         2         X	Par	t IV Checklist of Required Schedules			
$H^{+}$ (res.) complete Schedule A       1       X         3       Ide time cognitization expected to complete Schedule A, Schedule of Contributors?       3       X         4       Ide time cognitization expected to complete Schedule C, Part I       3       X         5       Ide time cognitization expected to Schedule C, Part I       3       X         6       Ide time cognitization expected to Schedule C, Part I       4       X         6       Ide time cognitization expected to Schedule C, Part I       4       X         6       Ide time cognitization expected to Schedule C, Part I       5       X         7       Via       Complete Schedule C, Part I       5       X         8       Did the cognitization reserve to role conversion asserted. Includuation exactor role role witch donorn have the right to provide advise on the distribution or investment of amounts in such funds or accountific V **es, "complete Schedule C, Part I       6       X         9       Did the cognitization reserve an amount in Part X, time 21, for earcorve or custodial accountific V **es, "complete Schedule D, Part I       8       X         9       Did the cognitization reserve an amount in Part X, time 21, for earcorve or custodial endownents, permanent endownents, permanent endownents, permanent endownents, earcount in Part X, time 21, **es, "complete Schedule D, Part V       9       X         11       It the cognitization reso			r	Yes	No
2         In the organization required to complete Schedule <i>B</i> , Schedule of Contributors <sup>2</sup> 2         X         2           3         Othe organization required to complete Schedule <i>D</i> , Part <i>I</i> 3         X           4         Section 501(c)(3) organizations. Dol the organization engage in letborg and the section 501(f) doction in effort doing the section 501(c)(4). 501(c)(5). or 501(c)(6) complete Schedule <i>C</i> , Part <i>I</i> 4         X           5         Did the organization as action 501(c)(4). 501(c)(5). or 501(c)(6) complete Schedule <i>C</i> , Part <i>I</i> 4         X           6         It the organization matrixin any doore advised tunds or any similar funds or accounts for which doores have the fifth to provide advised on the distributors or investment does accounts for which doores have the fifth to provide advised unds or investment does accounts for which doores have the fifth to provide advised unds or investment does accounts for which doores have the fifth to provide advised unds or investment does accounts for which doores have the fifth to provide advised unds or investment does accounts for which doores have the fifth to provide advised unds or investment does accounts for which doores have the fifth to provide advised unds or investment doe accounts for which doores have the fifth to provide advised under the fifth the organization report an amount in which contain transume to provide advised under account for which door accounts?         8         X           10         Did the organization report an amount in which which account flability serves a custedian for a mount for through range beschedule D, Part V         1         1         X	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
<ul> <li>But the organization expects of CPART II.</li> <li>But the organization expects of CPART II.</li> <li>But the organization asset of CPART II.</li> <li>But the organization asset of CPART II.</li> <li>But the organization expects of CPART II.</li> <li>CPART III.</li> <li>CPART IIII.</li> <li>CPART IIII.</li> <li>CPART IIII.<!--</td--><td></td><td></td><td></td><td></td><td></td></li></ul>					
public office? If ''res, 'complete Schedule C, Part I         3         X           4 Section 50 ((kg)) organizations. Old the organization engage in lobbying activities, or have a section 50 ((kg) section 10 effoct         4         X           6 Is the organization a section 50 ((kg) 50 ((kg))			2	X	
4         Section 50 (bc(3) organizations. Did the organization engage in lobbying activities, or have a section 50 (p) election in offect during the tax year // m/se, "complete Schedule C, Pet II         4         X           5         Is the organization a section 50 (bc)(4), 50 (c)(3), or 50 (c)(4), 50 (c)(3), or 50 (c)(4), 50 (	3				v
during the tax year? "Yes," complete Schedule C, Part II         4         X           5         is the organization a section 501(q)(q), 501(q)(q), 601(q)(q), 931(q)(q), 931(q)(q)(q)(q)(q)(q)(q)(q)(q)(q)(q)(q)(q)(			3		<u> </u>
5         Is the organization a section 501(b)(6), 501(b)(5), or 501(b)(5) organization that receives membership dues, assessments, or similar amounts as defined in Revonue Procedure 99 (197, 1*16), "complete Schedule C, Part II         5         X           6         Did the organization maintain any doorn adviced finds or any similar funds or accounts for which forous have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes," complete Schedule D, Part II         6         X           7         X         8         014 the organization maintain any doorn adviced in assume, including easements, to there schedule D, Part II         7         X           9         Did the organization maintain any doorn adviced in the source of the sinifar assuts? (If 'Yes," complete Schedule D, Part II         7         X           9         Did the organization fraction structures? (If 'Yes," complete Schedule D, Part II         8         X           9         Did the organization server to any of the following questions in "Yes," then complete Schedule D, Part V         10         X           10         Did the organization server to any of the following questions in "Yes," then complete Schedule D, Part V         114         X           11         If the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, ine 167 (If 'Yes," complete Schedule D, Part X)         114         X           12         Did the organization re	4				x
a mate a anounts as defined in Revenue Procedure 88-197 # "Yes," complete Schedule C, Part II       5       X         6       Did the organization maintain any denor advised funds or any amile funds or accounts for which donors have the right to provide advice on the distribution or investment of anounts in such funds or accounts for which donors have the right to 6       X         7       Did the organization receive or hold a conservation easoment, including easements to preserve open space, the environment, historical areas, or historical transmes, or other alimits account fability, serve as a cutodiain for amounts not listed in Part X, ine provide credit counseling, debt management, credit repair, or dabt negotiation sources?       7       X         9       Did the organization report an amount in Part X, line 21, for escrew or cutodial account fability, serve as a cutodiain for amounts not listed in Part X, ine provide credit counseling, debt management, credit repair, or dabt negotiation sports?       9       X         10       Did the organization directly or through a related organization, hold assets in temporally restricted endowments, permanent endowments?       10       X         11       If the organization report an amount for lead, buildings, and explicites in Part X, line 10? If "Yes," complete Schedule D, Part V       111       X         12       Did the organization report an amount for investments - organization field in Part X, line 12? If "Yes," complete Schedule D, Part X       111       X         13       Did the organization report an amount for investments- organ relate in Part X, line 13 that is 5% o	~		-4		
6       Did the organization meintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounta in such funds or accounts? If "Yes," complete Schedule D, Part II       6       X         7       Did the organization review rolds a conservation in such funds or accounts? If "Yes," complete Schedule D, Part II       7       X         8       Did the organization review rolds a conservation in cluding essements in such account liability, serve as a custodian for amounts not lists of in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not lists of in Part X, or provide redit courseling, det management, credit repair, or disch nogatization review in the organization review of through a related organization, review of the solutions and works of the review of the solution part X, line 10? II "Yes," complete Schedule D, Part V       10         8       Did the organization report an amount for investments - other socurities in Part X, line 10? II "Yes," complete Schedule D, Part V       11         9       Did the organization report an amount for investments - organization report in a amount for investments - organization related in Si W + Yes," complete Schedule D, Part V       11         10       Did the organization report an amount for investments - organization related (SC 7400)? If "Yes," complete Schedule D, Part X       114         114       X       Did the organization report an amount f	5		5		x
provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes, 'complete Schedule D, Part II         C         X           7         Did the organization receive robid a conservation esament, including esamenter to preserve open space, the environment, historical areas, or historic structures? If 'Yes, 'complete Schedule D, Part II         C         X           8         Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes, 'complete Schedule D, Part II         C         X           9         Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes, 'complete Schedule D, Part II         B         X           9         Did the organization directly or through a related organization, hold assets in temporality restricted endowments, permanent endowments, or quasi-indowments? If 'Yes, 'complete Schedule D, Part VI         9         X           10         Did the organization report an amount for laws, complete Schedule D, Part VI         10         X           11         the organization report an amount for investments - other socurities in Part X, line 10? If 'Yes,' complete Schedule D, Part VI         11a         X           0         Did the organization report an amount for investments - brogram related in Part X, line 12? If 'Yes,' complete Schedule D, Part X         11a         X           11         X         Did the organization robrot an amount for investherets-program related in Part X, line 13? If 'Yes,' co	6				
7       Old the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historica transmits? If "Yes," complete Schedule D, Part II       7       X         8       Old the organization maintain collections of vorks of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II       8       X         9       Old the organization report an amount in Part X, line 21, for secrow or custodial account liability, serve as a custodian for any other similar assets? If "Yes," complete Schedule D, Part IV       8       X         10       Did the organization, directly of through a related organization, hold assets in temporality restricted andowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V       11a       X         2       Did the organization report an amount for live stments - organize lise in Part X, line 10? If "Yes," complete Schedule D, Part X       11a       X         2       Did the organization report an amount for live stments - program related in Part X, line 10? If "Yes," complete Schedule D, Part X       11a       X         2       Did the organization report an amount for other assets in Part X, line 10 Part X, line 118 Lis 5% or more of Its total assets reported in Part X, line 116 /f "Yes," complete Schedule D, Part X       11a       X         11       Did the	ъ		6		x
the environment, historic land areas, or historic structures? (f "Yes," complete Schedule D, Part II       7       X         8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? II "Yos," complete Schedule D, Part II       8       X         9       Did the organization report an amount in Part X, line 21, for escrow or custofial account liability, serve as a custofial for amounts not listed in Part X, ion provide credit connesting, dobt management, credit repair, or dobt negotiation services?       9       X         10       Did the organization, directly or through a nelated organization, hold assets in temporarily restricted endowments, permanent endowments? II "yes," complete Schedule D, Part V.       9       X         10       Did the organization report an amount for investments - other securities in Part X, line 10? II "Yes," complete Schedule D, Part V.       10       X         111       X       Ithe organization report an amount for investments - other securities in Part X, line 10? II "Yes," complete Schedule D, Part VI.       111       X         112       X       Ithe organization report an amount for other liabilities in Part X, line 15? II "Yes," complete Schedule D, Part X.       111       X         113       X       Ithe organization report an amount for other liabilities in Part X, line 5? II "Yes," complete Schedule D, Part X.       111       X         114       X       Ithe organization report an amount for other liabilities in Part X, line 15 III Part	-				
8       Did the organization maintain collections of works of art, historical treasure, or other similar assits? #"res," complete Schedule D, Part III       8       X         9       Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation sorvices?       9       X         10       Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation sorvices?       9       X         11       The organization report an amount for land, buildings, and equipment in Part X, line 120 /f *4s," complete Schedule D, Part V       10       X         11       The organization report an amount for investments - other assoutifies in Part X, line 120 /f *4s," complete Schedule D, Part VI       11       X         11       Did the organization report an amount for investments - program related in Part X, line 130 #th is 5% or more of its total assets reported in Part X, line 157 # *1%s, "complete Schedule D, Part VIII       11       X         11       Did the organization report an amount for investments - program related in Part X, line 157 # *1%s, "complete Schedule D, Part X       11       X         11       X       110       X       111       X         11       Z       111       X	1	-	7		x
Schedule D, Part III       B       X         9       Old the organization report an amount in Part X, line 21, for eacrow or custodial account liability, serve as a custodian for amounts not liabid in Part X, ior provide craft counsaling, dobt management, credit repair, or debt negotiation services?       9       X         9       Old the organization, directly or through a related organization, hold assets in temporarily restricted andowments, permanent endowments, or quasi-endowments? If "yes," complete Schedule D, Part V       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "yas," complete Schedule D, Part VI       10       X         2       Did the organization report an amount for investments - other assets in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "yes," complete Schedule D, Part VI       11a       X         2       Did the organization report an amount for investments - organization report an amount for investments - organization report an amount for investments or the tax, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "yes," complete Schedule D, Part X       11a       X         3       Did the organization report an amount for investments or the tax year include a foorothe that addresses the organization insport or same assets in Part X, line 15? If "yes," complete Schedule D, Part X       11a       X         11       X       11d       X       11d       X         12a       Did the organ	•				
9         Did the organization report an amount in Part X, line 21, for eacrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, dobt management, credit repair, or dobt negotiation services?         9         X           10         Did the organization, directly or through a valated organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If *Yes,* complete Schedule D, Part V         10         X           11         If the organization's answer to any of the following questions is *Yes,* then complete Schedule D, Part V         10         X           2         Did the organization report an amount for land, buildings, and equipment in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 (#*yes,* complete Schedule D, Part VII         11         X           2         Did the organization report an amount for other assets in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 (#*yes,* complete Schedule D, Part VII         11         X           2         Did the organization report an amount for other assets in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 (#*yes,* complete Schedule D, Part VIII         11         X           4         Did the organization orport an amount for other assets in Part X, line 127 (#*yes,* complete Schedule D, Part X         11         X           4         Did the organization orbit assets approaches         Schendue D, Part X         11         X<	8		0		x
amounts not listed in Part X, or provide credit counseling, dobt management, credit repair, or debt negotiation services?       9       X         10 Did the organization, directly or through a related organization, hold assets in temporarily restricted andowments, permanent endowments, or quasi-endowment? If 'Yes,' complete Schedule D, Part V       10       X         11 If the organization, directly or through a related organization, hold assets in temporarily restricted andowments, permanent endowments, or quasi-endowments? If 'Yes,' completes Schedule D, Part V       10       X         12 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI       11a       X         13 Did the organization report an amount for investments - other socurities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII       11a       X         14 Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part X       11e       X         11d the organization report an amount for other assets in Part X, line 25? If 'Yes,' complete Schedule D, Part X       11e       X         11d the organization's isolality for uncertain tax postions under FIN 48 (ASC 740? If 'Yes,' complete Schedule D, Part X       11e       X         11d the organization's isolality for uncertain tax postions under FIN 48 (ASC 740? If 'Yes,' complete Schedule D, Part X       11e       X	•		0		
# "Yes," complete Schedule D, Part IV       9       X         10       Did the organization, directly or through a related organization, hold assets in temporarity restricted endowments, errmanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V       10       X         11       If the organization sanswer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, XI, or X as applicable.       10       X         a       Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI       11a       X         b       Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI       11b       X         c       Did the organization report an amount for other fashed is Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XI       11c       X         d       Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         11       X       Did the organization include in consolidate financial statements for the tax year?       11t       X         12       Did the organization include in consolidated, independent audited financial statements for the tax year?       11t       X         13       Is the organizatio	9				
Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments // *Yes,* complete Schedule D, Part V       10       X         11 fth organization report an amount for land, buildings, and equipment in Part X, line 10? // *Yes,* complete Schedule D, Part V       11a       X         b Did the organization report an amount for land, buildings, and equipment in Part X, line 10? // *Yes,* complete Schedule D, Part V       11a       X         b Did the organization report an amount for investments - other securities in Part X, line 12? that is 5% or more of its total assets reported in Part X, line 16? // *Yes,* complete Schedule D, Part VI       11b       X         c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? // *Yes,* complete Schedule D, Part VII       11c       X         c Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? // *Yes,* complete Schedule D, Part X       11c       X         11d       X       11d       X       11d       X         12 Did the organization separate or consolidated financial statements for the tax year include a footnot that addresses the organization asparate, independent audited financial statements for the tax year?       11f       X         12 Did the organization asparate, independent audited financial statements for the tax year?       11f       X			0		x
endowments, or quasi-endowments? # 'Yes," complete Schedule D, Part V       10       X         11       If the organization's answer to any of the following questions is 'Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X       as applicable.         a)       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? # 'Yas," complete Schedule D, Part VI       11a       X         b)       Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? # 'Yas," complete Schedule D, Part VI       11a       X         c)       Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? # 'Yas," complete Schedule D, Part VI       11c       X         d)       Did the organization report an amount for other assets in Part X, line 25? # 'Yes," complete Schedule D, Part X       11d       X         e)       Did the organization sibality for uncertain tax positions under FIN 48 (ASC 740? # 'Yes," complete Schedule D, Part X       11t       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11t       X         12a       X       by as the organization as achol described in B 20/V(A)(N)(N) H'Yes," complete Schedule D, Part X and XII       12b       X         12a       Did the organization included in consolidated	40		9		
11       If the organization's answer to any of the following questions is 'Yes,'' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.       11         a)       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI       11a       X         b)       Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,'' complete Schedule D, Part VII       11a       X         c)       Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,'' complete Schedule D, Part VII       11b       X         c)       Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,'' complete Schedule D, Part X       11d       X         d)       Did the organization report an amount for other assets in Part X, line 25? If 'Yes,'' complete Schedule D, Part X       11e       X         12a       Did the organization report an amount for other assets in Part X, line 16? If 'Yes,'' complete Schedule D, Part X       11e       X         12a       Did the organization report an amount for other assets in Part X, line 25? If 'Yes,'' complete Schedule D, Part X       11t       X         12a       Did the organization negarate, independent audited financial statements for the tax yea?'       11	10		10		x
as applicable.       Image: Complete Schedule D, Part VI         b Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI       Image: Complete Schedule D, Part VI         b Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII       Image: Complete Schedule D, Part VII         c Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X III       Image: Complete Schedule D, Part X IIII         c Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       Image: Complete Schedule D, Part X         e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       Image: Complete Schedule D, Part X         11a       X         11b       X         11c       X         11d					
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       11a       X         b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VI       11b       X         c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII       11c       X         d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11c       X         d Did the organization report an amount for other labilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11d       X         e Did the organization's separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X       11t       X         12a Did the organization aschool described in section TOVD(T)(A)(Wi)?       If Yes, "and If the organization aschool described in section TOVD(T)(A)(Wi)?       If Yes," complete Schedule D, Part X and X is optional       11t       X         13a       X       11d       X       11d       X       11d       X         14a       X       11d       Yes," complete Schedule D, Part X X and X	11				
Part VI       11a       X         b Did the organization report an amount for investments - other socurities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16/1 // *Yas," complete Schedule D, Part VII       11b       X         c Did the organization report an amount for investments - program related in Part X, line 15 // fr*gs," complete Schedule D, Part VII       11c       X         d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16/1 // *Yas," complete Schedule D, Part XII.       11c       X         d Did the organization report an amount for other assets in Part X, line 25/1 // *Yes," complete Schedule D, Part X       11c       X         f Did the organization report an amount for other assets in Part X, line 25/1 // *Yes," complete Schedule D, Part X       11c       X         12a       Did the organization separate or consolidated financial statements for the tax year?       11t       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11t       X         13a       Is the organization naintain an office, employees, or agents outide of the United States?       11d       X         14a       X       Did the organization aschool described in section 170(b)(1/A)(i/i) // * * * es, " complete Schedule E       11a       X         15       Did the organization report on Part X, column (A), line 3,					]
b       Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 // *Yes," complete Schedule D, Part VII       11b       X         c       Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 // *Yes," complete Schedule D, Part VII       11c       X         d       Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 167 // *Yes," complete Schedule D, Part X       11c       X         d       Did the organization report an amount for other assets in Part X, line 257 // *Yes," complete Schedule D, Part X       11d       X         f       Did the organization sport an amount for other liabilities in Part X, line 257 // *Yes," complete Schedule D, Part X       11d       X         12a       Did the organization bital separate, independent audited financial statements for the tax year?       11t       X         12a       Did the organization nolucided in consolidated, independent audited financial statements for the tax year?       11t       X         12a       M if the organization associal 400 (Described in section 170b)(11(A)(A)(II) * *Yes," complete Schedule E       13       X         14a       Did the organization aschol described in section 170b)(11(A)(A)(II) * *Yes," complete Schedule E       13       X         14a	а		110		x
assets reported in Part X, line 16? /f "Yes," complete Schedule D, Part VII       11b       X         c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total       11c       X         d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? /f "Yes," complete Schedule D, Part X       11c       X         e Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? /f "Yes," complete Schedule D, Part X       11d       X         e Did the organizations separate or consolidated financial statements for the tax year include a foothote that addresses the organization obtain separate, independent audited financial statements for the tax year?       111       X         12a Did the organization association answered "No" to line 12a, then completing Schedule D, Part X and XII is optional       12a       X         b Was the organization association answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       13       X         14a Did the organization association answered "No" to line 12a, then complete Schedule D, Part X       14a       X         14b Did the organization association answered "No" to line 12a, then complete Schedule E       13       X         14a Did the organization association answered "No" to line 12a, then complete Schedule E       13       X         14a Did the organization m	<b>L</b>		114	·····	**
c       Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? // 'Yes," complete Schedule D, Part VIII       11c       X         d       Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? // 'Yes," complete Schedule D, Part X       11c       X         e       Did the organization report an amount for other assets in Part X, line 25? // 'Yes," complete Schedule D, Part X       11e       X         f       Did the organization's isolation report an amount for other liabilities in Part X, line 25? // 'Yes," complete Schedule D, Part X       11e       X         f       Did the organization's isolation report an amount for other liabilities in Part X, line 45? // 'Yes," complete Schedule D, Part X       11t       X         12a       Did the organization aspearate, independent audited financial statements for the tax year?       11t       X         13       Is the organization aschool described in section 170(b)(1)(A)(ii)? // 'Yes," complete Schedule F.       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         14       Did the organization naintain an office, employees, or agents outside of the United States?       14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gra	a		146		x
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII       11c       X         d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X       11d       X         e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         f Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         12a Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11t       X         12a Did the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11t       X         12a Did the organization included in consolidated, independent audited financial statements for the tax year?       If "Yes," and if the organization answerd "No" to line 12a, then complete Schedule E, Parts X and XII       12b       X         13 Is the organization maintain an office, employees, or agents outside of the United States?       14a       X         14 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for roreign individuals? If "Yes," complete Schedule G, Part I       14b       X         15 Di	_				
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? // "Yes," complete Schedule D, Part X       11d       X         e Did the organization report an amount for other liabilities in Part X, line 25? // "Yes," complete Schedule D, Part X       11d       X         f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year?       11t       X         12a       Did the organization neutod in consolidated, independent audited financial statements for the tax year?       // "Yes," complete Schedule D, Part X       11t       X         12a       Did the organization neutod in consolidated, independent audited financial statements for the tax year?       // "Yes," complete Schedule D, Part X and XII       12a       X         b Was the organization answerd "No" to line 12a, then completing Schedule D, Part X and XII is optional       12b       X         13       Is the organization nawerd "No" to line 12a, then completing Schedule E       13       X         14a       Did the organization nawerd withies outside the United States?       14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         16       Did the organ	C		110		x
Part X, line 16? (f "Yes," complete Schedule D, Part IX       11d       X         e Did the organization report an amount for other liabilities in Part X, line 25? (f "Yes," complete Schedule D, Part X       11e       X         f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization batan separate, independent audited financial statements for the tax year?       11f       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11f       X         13       Is the organization a school described in section 170(b)(1)(A)(ii)?       If "Yes," complete Schedule D, Parts XI and XII is optional       12b       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts I and IV       16       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part I       17       X         17       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X <td>d</td> <td></td> <td></td> <td></td> <td></td>	d				
e Did the organization roport an amount for other liabilities in Part X, line 25? // "Yes," complete Schedule D, Part X       11e       X         f Did the organization roport an amount for other liabilities in Part X, line 25? // "Yes," complete Schedule D, Part X       11t       X         f Did the organization sizability for uncertain tax positions under FIN 48 (ASC 740)? // 'Yes," complete Schedule D, Part X       11t       X         12a Did the organization separate, independent audited financial statements for the tax year? // '/ 'Yes," complete Schedule D, Part X and XII       11t       X         13 Is the organization aschool described in section 170(b)(1)(A)(ii)? // 'Yes," complete Schedule E       12a       X         14a Did the organization neport on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 for grants or other assistance to or for foreign individuals? // 'Yes," complete Schedule F, Parts I and IV       14a       X         15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? // 'Yes," complete Schedule F, Parts III and IV       16       X         16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? // 'Yes," complete Schedule F, Parts III and IV       16       X         17 Did the organization report more than \$15,000 of gross income from gaming activities on Part IX, column (A	u		11d		х
1       Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       111         12a       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete       111         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       If "Yes," complete         13       Is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b         14       Did the organization maintain an office, employees, or agents outside of the United States?       14a         14       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts II and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II       16       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II       17       X         17       Did the organization report more tha	•				
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11f       X         12a       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete       12a       X         12b       Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         13       Is the organization aschool described in section 170(b)(1)(A)(i)? If "Yes," complete Schedule E.       13       X         14a       Did the organization naintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization neord on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         18       Did the organization report nore than \$15,000 of grants or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17					
12a       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12b       X         13       Is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       X         14a       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gagregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17       Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part II       16<	·		11f		x
Schedule D, Parts XI and XII       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12b       X         If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       13       X         13       Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       X         14a       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garnes or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         17       Did the organization report at total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part	12a				
b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12         if "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       13         13       Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a         b       Did the organization neore aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule G, Part I       16       X         17       Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), line 3, more than \$5,000 of gross income and contributions on	12.0		12a	1	х
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         13       Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gagregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         17       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV       16       X         18       Did the organization report more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       17       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       18       X         19       Did the organization report	h				
13       1 too, or organization a school described in section 170(b)(1)(A)(II)? /f "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         14b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV       16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6, and 11e? If "Yes," complete Schedule G, Part I       16       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II       17       X         18       Did the orga		•	12b		х
14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>It</i> "Yes," <i>complete Schedule F, Parts I and IV</i> 14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign individuals? <i>It</i> "Yes," <i>complete Schedule F, Parts II and IV</i> 15       X         16       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i> 17       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 1       18       X         19       Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> 18       X         20a       X       Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20a       X         20a       X       Did the organization report more than \$5,000 of grants or other assistance to any domes	13				
b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> 14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts II and IV</i> 15       X         16       Did the organization report a Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts II and IV</i> 16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> 17       X         18       Did the organization report more than \$15,000 of gross income and contributions on Part VIII, lines 12 and 82? <i>If "Yes," complete Schedule G, Part II</i> 18       X         19       Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> 20a       X         20a       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       19       X         20a       Did the organization operate one		·			
investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? // "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for any foreign individuals? // "Yes," complete Schedule F, Parts III and IV       16       X         17       Did the organization report a total of more than \$15,000 of expresses for professional fundraising services on Part IX, column (A), lines 6 and 11e? // "Yes," complete Schedule G, Part I       17       X         18       Did the organization report more than \$15,000 of gross income and contributions on Part VIII, lines 1c and 8a? // "Yes," complete Schedule G, Part II       17       X         19       Did the organization operate one or more hospital facilities? // "Yes," complete Schedule H       20a       X         20a       Did the organization report more than \$5,000 of grasts or other assistance to any domestic organization or       19       X         20a       Did the organization perform more than \$15,000 of gross income from garming activities on Part VIII, line 9a? // "Yes,"       18       X         20a       Did the organization operate one or more hospital facilities? // "Yes," complete Schedule H       20a       X				1	
or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I       17       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 18       18       X         19       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20a       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       19       X	~				
<ul> <li>15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i></li> <li>16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i></li> <li>17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i></li> <li>18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i></li> <li>19 Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i></li> <li>20a Did the organization report more than \$5,000 of grants or other assistance to this return?</li> <li>20b</li> </ul>			14b		х
foreign organization? // "Yes," complete Schedule F, Parts II and IV       15       X         16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? // "Yes," complete Schedule F, Parts III and IV       16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? // "Yes," complete Schedule G, Part I       16       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 and 82? // "Yes," complete Schedule G, Part I       17       X         19       Did the organization report more than \$15,000 of gross income from garning activities on Part VIII, line 9a? // "Yes,"       18       X         20a       Did the organization operate one or more hospital facilities? // "Yes," complete Schedule H       20a       X         20a       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       17       X	15				· · · · ·
16       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i> 16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i> 17       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> 18       X         19       Did the organization operate one or more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       17       X			15		х
or for foreign individuals? /f "Yes," complete Schedule F, Parts III and IV       16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? /f "Yes," complete Schedule G, Part I       17       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? /f "Yes," complete Schedule G, Part II       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? /f "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? /f "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       14       14	16				
<ul> <li>17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i></li></ul>			16		Х
column (A), lines 6 and 11e? // "Yes," complete Schedule G, Part I       17       X         18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? // "Yes,"       18       X         20a       Did the organization operate one or more hospital facilities? // "Yes," complete Schedule H       20a       X         20a       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       17       X	17				
18       Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes,"</i> 18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes,"</i> 19       X         20a       Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> 20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       T       T			17		Х
1c and 8a? // "Yes," complete Schedule G, Part II       18       X         19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? // "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? // "Yes," complete Schedule H       19       X         20a       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       10       10	18				
19       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"       19       X         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       T       T	-		_18		X
complete Schedule G, Part III         20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         20b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       V	19				
20a       Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H       20a       X         b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       20b       20b			19		
b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b         21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or       20b	20a		20a		X
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or					
	21				1
		domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21		X

Form 990 (2018)

North Central Accountable Community of Health

Part IV         Checklist of Required Schedulos         Control           22         Did the organization record may than \$5,000 of grants or other assistance to or for domestic individuals on Park IX count MM, Ine 27         Yes         No.           23         Did the organization arows "Yes" to Part IX like School A, Ims 3, A or 5 about compensation of the organization's current and forms" officing, directors, trustees, key employees, and highest compensation of the organization's current based of the organization how the support of the organization in the support of the organization in the support of the organization interacting principal amount of more than \$100,000 as of the based of the organization interacting and postered at the occurrent based biologith 24 and complete School Park IV No.         240           241         Did the organization interacting and postered at tensoring principal amount of more than \$100,000 as of the any toxicon the support of the organization interacting and the organization interacting and postered at tensoring to the organization interacting and the interacting with a disputite spain?         240           242         Did the organization interacting and biologiki arganizations. Did the organization organization interacting in the support in the school filth and school postered at the trunsaction has not been reported on any of the organization in organization in a pilor year, and this the trunsaction has not been reported on any of the organization in policy in the addition or any of the organization in policy in a school policy in the addition or any addition accure the tensoid and addition and the addition accure the organization in a policy addition accure the addition accure the organization in policy any addition accure the addition accure the addition	Form	990 (2018) Community of Health 82-16	526178	P	age 4
22       Did the organization report more them \$5.000 of grants or other assistance to orfor domentic individuals on Part X, column \$5.0000 at \$4.00000 at \$4.000000000000000000000000000000000000	Par	t IV Checklist of Required Schedules (continued)			
Part R, column (A), line 27, if Yes, 'complete Schedule, L, et al. and iii.       22       X         20 bit the organization answer' Yes, 'complete Schedule, L, et al. (A), fairs 3, of 6 about componisation of the organization aurent schedule J.       23       X         24a Did the organization have' Yes, 'complete Schedule J.       23       X         24b Did the organization have a tax everypt bord lacks with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after Desembor 31, 2002 II **es, 'a same' inne 24b through 24d and complete Schedule J.       24b         24b Did the organization have a size of the Desembor 31, 2002 II **es, 'a same' inne 24b through 24d and complete Schedule J.       24b         24b Did the organization network and or the than a returning descrew at any time during the year's Defense any tax events benefit of the same for bonds outstanding at any time during the year's Defense any tax events benefit of the organizations. Did the organization engage in an excess bordit transaction with a disqualified person of the grave part of the organization and the organization any and that the transaction have the organization any Did PG/LZ7 if Yes, 'complete Schedule L, Part I       25b       X         27 Did the organization provide gravit on other assistance to an officer, director, tustes, key employee, not disqualified persons? If Yes, 'complete Schedule L, Part I       22b       X         28 Did the organization any and the subscience onomittee member, or to assist control of any difference, director, tustes, ex representation any and the organization and the subscience onothic dinexyscience onothic difference and the part of				Yes	No
22         Did the organization averer "Yet" to Fart VIL Section A, line 3, 4, or 5 about componation of the organization's current and former differs, directors, trustees, key employees, and high-ext composited amployees? If "Yes," complete Schedule J, Ver, Ver, Yet, Yet, Yet, Yet, Yet, Yet, Yet, Yet	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
22       Did the organization awaver "Yes" to Fart VII, Section A, Ine 3, 4, or 6 about comparisation of the organization's current and forms (filters, directors, trustees, key employes, and highest comparisated employees? If 'Yes,' complete Schedule J, I' No, ' complete Schedule J, Part I       23       X         24a Did the organization have a stacknempt bond is use with an ontaanding principal amount of more than \$100,000 as of the Schedule J, I' No, ' complete Schedule J, I' No, ' complete Schedule J, Part I       24a       X         25 Did the organization mixed at any troeeds of tax-axiengt bonds beyond a temporary period exception?       24d       X         26 Section OD(26), 505(e)(4), 406(e)(4), 505(e)(4), 406(e)(4), 506(e)(4), 406(e)(2), 506(e)(4), 406		Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
Schedule J       23       X         As Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the issue data day of the yare, that was issued after Decomber 31, 2002? If "Yes," enswerlines 24b through 24d and complete       24a         X       Did the organization invest any proceeds of tax-exampt bonds beyond a temporary period exception?       24b         C Ib the organization maintain an excerve account other than a refurcing excerve at any time during the year?       24d         Z B Section 50(163), 501(24), 406(24), and 501(25) comparizations. Did the organization ange in an oxcess benefit transaction with a disqualified period nutring the year? <i>I</i> "Yes," complete Schedule L, Part I       25a         Z B Did the organization except that the organization except back through the year?       24d       X         Z Did the organization except that the organization except back through the year?       24d       X         D Is the organization except that the organization except back through the year?       24d       X         D Is the organization aver that the transaction has not been reported on any of the organization part back and that the transaction that an except back and the section that an except back and the section of part and that the transaction through the gradies complexes through the part of the arganization any of the organization part back and the section through the section of the organization part back and the part of the arganization and the through parts and the part of the arganization and the transact and the transact and the teregated in an exception of the corganization part bac	23				
242 DUd the organization have a tax esempt bond issue with an outstanding principal amount of more than \$100,000 as of the bial day of the year, that was issued after December 31, 2002? If "Yes," answer lanes 24b through 24d and complete Schedule K. If 'No," go to like 28a.       24a       X         b DU the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?       24b       X         b DU the organization invest any proceeds of tax-exempt bonds outstanding a tary time during the year to defease any tax-exempt bonds?       24c       24c         27a Becton 601(c)(8), 501(c)(4), and 601(c)(23) organizations. Did the organization argues in a excess benefit transaction with a disqualified person in a prior year, and that the tarsaction tare not a texture form of the second tar thy are war?       22a       X         27b Ib the organization argue in an excess benefit transaction with a disqualified person in a prior year, and that the tarsaction tare not been reported on any of the organization's prior Form S90 or 990 E27: If 'yea,' complete Schedule L, Part I       28a       X         27b Did the organization prived is grant or other assistance to an officer, director, trustee, or disqualified person? If 'yea,' complete Schedule L, Part I       28b       X         27b Did the organization prived is grant or other assistance to an officer, director, trustee, or disqualified person? If 'yea,' complete Schedule L, Part IV       28b       X         28b Organization prived is grant or other assistance to an officer, director, trustee, or officer, director, trustee, or warphice Schedule L, Part IV       28b       X		and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
24       Did the organization have a tax-exempt bond issue with an cubandrup principal amount of more than \$100,002 as of the last day of the way, that was issued after Desember \$1, 2002? If 'Yes,' answer inso 24b through 24d and complete Schedule K, If 'Ne,' for the 25a		Schedule J	23		Х
Schedule K, If Yue, 'go to file 25a       24a       X         D Od the organization maintain an occrow account other than a refunding excrow at any time during the year to defease any tax exempt bonds?       24a       24a         D Od the organization maintain an occrow account other than a refunding excrow at any time during the year to defease any tax exempt bonds?       24a       24a         D D of the organization acid as an 'on behalf of' issuer for bonds outstanding at any time during the year?       24a       24a         D a the organization acid as an 'on behalf of' issuer for bonds outstanding at any time during the year?       24a       24a         D a the organization acid as an 'on behalf of' issuer for bonds outstanding at any time during the year?       24a       24a         D a the organization acid as an 'on behalf of' issuer for bonds outstanding at any time during the year?       24a       24a         D the organization acid at the regard of the organization's profes Chardule L, Part I       25a       X         D Od the organization provide a grant or othor assistance to an officer, director, trustee, key employee, substantial contributor or employee threed, a grant assistance to an officer, director, trustee, key employee, substantial contributor or employee threed, a grant assistance to an officer, director, trustee, key employee, substantial contributor or employee threed, a grant assistance to who organization acids at the second the low organization ac	24 a				
Schedule K, If Yue, 'go to file 25a       24a       X         D Od the organization maintain an occrow account other than a refunding excrow at any time during the year to defease any tax exempt bonds?       24a       24a         D Od the organization maintain an occrow account other than a refunding excrow at any time during the year to defease any tax exempt bonds?       24a       24a         D D of the organization acid as an 'on behalf of' issuer for bonds outstanding at any time during the year?       24a       24a         D a the organization acid as an 'on behalf of' issuer for bonds outstanding at any time during the year?       24a       24a         D a the organization acid as an 'on behalf of' issuer for bonds outstanding at any time during the year?       24a       24a         D a the organization acid as an 'on behalf of' issuer for bonds outstanding at any time during the year?       24a       24a         D the organization acid at the regard of the organization's profes Chardule L, Part I       25a       X         D Od the organization provide a grant or othor assistance to an officer, director, trustee, key employee, substantial contributor or employee threed, a grant assistance to an officer, director, trustee, key employee, substantial contributor or employee threed, a grant assistance to an officer, director, trustee, key employee, substantial contributor or employee threed, a grant assistance to who organization acids at the second the low organization ac		last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
b Didthe organization invest any proceeds of tax-exampt bonds beyond a temporary period exception?       [24a]         c Didthe organization mixelian an oscrow account other than a refunding secrow at any time during the year 0 defease any tax-exampt bonds?       [24a]         d Did the organization accels as an 'on behalf of' issuer for bonds outstanding at any time during the year?       [24d]         28 Section 601(6)(3), 601(6)(4), and 601(6)(20) graphizations. Did the organization argues in an excesse benefit transaction with a disqualified person in a prior year, and that the transaction means the exception the organization argue that exception in a prior year, and that the transaction mean to been reported on any of the organization's prior Forms 980 or 980 E27. If "Yes," complete Schedule L, Part I       [25a]       X.         27 Did the organization argue that is engaged in an excesse benefit transaction with a disqualified person. If "Yes," complete Schedule L, Part IV from officers, director, trustes, key employees, substantial contributor or employe thered, a grant at acceler norm: intere member, or to a 35% controll of any of these person? If "Yes," complete Schedule L, Part IV       [26a]       X.         27 Did the organization approxipe agrant advices, condition, and exceptions;       a current or former officer, director, trustes, expected the part IV       [26a]       X.         28 Was the organization approxipe agrant advices or key employee? If "Yes," complete Schedule L, Part IV       [26a]       X.         29 Was the organization receive on theme of floar, director, trustes, or key employee? If "Yes," complete Schedule L, Part IV       [26a]       X.			24a		Х
c       Did the organization maintain an encrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds?       24d         db       Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?       24d         25a       Section 60 (tc)(3), 60 (tc)(4), and 60 (tc)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person dring the year?       24d         25a       Section 50 (tc)(3), 60 (tc)(4), and 60 (tc)(20) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization proves, ordingualified person in a prior year, and that the transaction taxes, layer employees, highest compensated engipses, or disqualified persons?       1" Yea," complete Schedule L, Part I         25b       X       Did the organization provide a grant or other assistance to an officer, director, trustee, layer employee, substantial contributor or employee thereo(1, grant allection committee membar, or to a 35% controlled antity or family member of a urrent or former officer, director, trustee, or key employee (trustee), and analy member of a current or former officer, director, trustee, or key employee (trustee), and analy to a business transaction with one of the following parties (see Schedule L, Part IV       28a       X         26d       X       A surrent or former officer, director, trustee, or key employee (trustee), and any to the organization receive and the see any complete Schedule L, Part IV       28a       X         27       X	b		 24b		
any tax exempt bords?     24c       4 Det the organization and a an 'on behalf of issuer for bonds outsigning at any time during the year?     24d       25a     Section 601(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year?     25a       25a     Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction means the engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, thrates, key employees, highest compensated employees, or disqualified persons? If "res," complete Schedule L, Part I     26a       27     Did the organization aver that the absence to an officer, director, trustee, key employees, and any of these persons? If "res," complete Schedule L, Part II     27a       28     Was the organization approxiption Schedule L, Part II     27a       29     Was the organization approxiption Schedule L, Part II     27a       20     Numer of former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part II     28b       29     A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part II     28b       20     Numer of arrow of their director, trustee, or key employee? If "Yes," complete Schedule L, Part II     28b       20     Numer of former officer, director,					
d Did the organization act as an "on bahal of" issuer for bands outstanding at any time during the year"       24d         25a Section 60(c)(a), 50((c)(a), and 50((c)(20) organizations, to Cit the organization engage in an excess benefit       25a         3 In the organization with a disputified person during the year" (#Yes," complete Schedule L, Part I       25a         3 Did the organization as not been reported on any of the organization's pior Forms 500 or 905-271 (#Yes," complete Schedule L, Part I       26a         3 Did the organization poor day amount on Part X, line 5, 6, of 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? (# 'Yes," complete Schedule L, Part I       26a         3 Did the organization poor day a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thered, a grant selection committee member, or to a 53% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II       27         3 Was the organization poor officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV       28a       X         4 A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV       28a       X         3 Did the organization powerb to former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV       28a       X         3 Did the organization neader or more officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV			24c		
25a       Section 601(c)[3), 501(c)[42) and 601(c)[220] organizations. Did the organization engage in an excess benefit transaction with a disgualified person in a prior year, and that the transaction has not been reported on any of the organization sport sport any amount on Part X, line 5, 6, or 22 for receivable from or gapaxies to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part I       25a       X         27       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part I       26       X         28       Was the organization await to other assistance to an officer, director, trustee, key employees abbatnial contributor or employee thereof, a garat alsel colon committee member, or to a 255% controlled entity or family member of a aurent or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV       27       X         28       Was the organization receive contributions of rat, historical treasures, or other similar assets, or qualified conservation continuer of the organization receive contributions of rat, historical treasures, or other similar assets, or qualified conservation contributions of ry 'Yes,' complete Schedule L, Part IV       28a       X         29       Did the organization receive contributions of ry 'Yes,' complete Schedule L, Part IV       28b       X         29       Did the organization receive contributions of ry 'Yes,' complete Schedule L,	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
transaction with a disqualified person during the year? # "Yes," complete Schedule L, Part I       25a       X         b is the organization aware that it engaged in an excess banefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 90 or 909-E27. If "Yes," complete Schedule L, Part I       26b       X         27D Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part I       26b       X         27D Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, substantial contributor or employee thered, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV       27       X         28       Was the organization receive conditions, and exceptions;       a Acurent or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization receive nore than 250 colin non-cash or key employee? If "Yes," complete Schedule L, Part IV       28a       X         20       A miny member of floer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         20       Did the organization necelyde contrefluctions or they employee? If "Yes," compl					
b       Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 1900 or 990-E27. If "Yes," complete Schedule L, Part I       ZEb       X         26       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustees, key employees, bightest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II       ZEb       X         27       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee mombor, or to a 25% controlled entity or family member of a ourset, a cannot the organization applicable filing thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       Zeb       X         28       Was the organization applicable filing thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       Zeb       X         29       Did the organization receive contributions of at, historical trasures, or char infling member thereof) was an officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       Zeb       X         29       Did the organization neceive contributions of at, historical trasures, or char infling member dis current or former office			259		x
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete       25       X         20 Of the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II       26       X         27 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustee, key employee, substantial contributor or employee thereof, a grant selection committee membor, or to a 55% controlided antity or family member of any of these persons? If "Yes," complete Schedule L, Part IV       28       X         28 Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV       28       X         29 Uf the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV       28       X         29 Uf the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30 Uf the organization receive contributions of at, historical treasures, or charsitian assets, or qualified conservation contributions? If "Yes," complete Schedule K, Part I       30       X         30 Uf the organization receive any Displex Schedule K, Part I       30       X       30       X         31 Uf the organization receive any changet schedule K, Part I       30       X	h				
Schedule L, Part I       25b       X         28       Did the organization report any amount on Part X, lime 5, 6, or 22 for receivables from or payables to any current or former officers, fluctors, trustese, key employees, highest compensated employees, or disqualified parsons? II "yes," complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? II "Yes," complete Schedule L, Part IV       27       X         28       Was the organization provide a grant or other assistance to with one of the following parties (see Schedule L, Part IV)       28a       X         29       A current or former officer, director, trustee, or key employee? II "Yes," complete Schedule L, Part IV       28a       X         29       D A family member of a current or former officer, director, trustee, or key employee? II "Yes," complete Schedule L, Part IV       28a       X         29       D d the organization receive more than 25C 0001 non-cash contributions? II "Yes," complete Schedule M       29       X         30       Did the organization receive and bisorical treasures, or other similar assets, or qualified conservation contributions? II "Yes," complete Schedule M.       29       X         31       X       31       X       31       X       31       X	Ň				i
26       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II       26       X         27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee membor, or to a 35% controlled antity or family member of any of these persons? If "Yes," complete Schedule L, Part II       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable) filing thresholds, conditions, and exceptions):       28a       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization receive contributions of ant, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization receive contributions of ant, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule R, Part IV       28a       X         29       Did the organization receive contributions of ant, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part IV       29a       X         20			255		x
former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? # 'Yes,'     26     X       20     Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? # 'Yes,' complete Schedule L, Part II     27     X       28     Was the organization approximation, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV     28a     X       29     Did the organization approximation of filter, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV     28a     X       29     Did the organization approximation of filter, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV     28a     X       29     Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule L, Part IV     28a     X       29     Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M     29     X       30     Did the organization receive applicable if applete Schedule R, Part I     30     X       31     Did the organization and exceptive M     Schedule R, Part I     31       32     X     Assets organization applete Schedule M     30     X       33     Did the organization receive any payment from the organiza	26		200		<u> </u>
complete Schedule L, Part II     26     X       27     Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yas," complete Schedule L, Part III     27     X       28     Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable) filing thresholds, conditions, and exceptions):     a A current or former officer, director, trustee, or key employee? If "Yas," complete Schedule L, Part IV     28a     X       29     Did the organization receive contributions of art, historical tressures, or key employee? If "Yas," complete Schedule L, Part IV     28c     X       29     Did the organization receive contributions of art, historical tressures, or very employee? If "Yas," complete Schedule M     29     X       20     Did the organization receive contributions of art, historical tressures, or other similar assets, or qualified conservation contributions? If "Yas," complete Schedule M     29     X       31     X     Old the organization necelve contributions of art, historical tressures, or other similar assets, or qualified conservation contributions? If "Yas," complete Schedule R, Part II     30     X       32     Did the organization necelve contributions of art, historical tressures, or other similar assets? If "Yas," complete Schedule R, Part II     31     X       33     Did the organization sell, exchange, disp	20				
27       Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, onditions, and exceptions):       28       X         28       Mass the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, onditions, and exceptions):       28a       X         29       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV instruction, for organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29a       X         20       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29a       X         31       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       30a       X         32       Did the organization receive ontributions of art, historical treasures, or other similar assets, or gualified conservation contributions? If "Yes," complete Schedule M       30a       X         33       Did the organization receive and the aspert of the organization receive any payment from the arganization under Re			00		v
contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member       27       X         Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV       28a       X         Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV       28a       X         A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         D A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         D Id the organization receive more than 52:000 in non-eash contributions? If "Yes," complete Schedule M       29       X         30       X       30       X         31       X       30       X         32       Vid the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       X         32       Vid the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31       X         33       Did the organization negate assempt or transfer more than 25% of its net assets? If "Yes," complete Schedule A, Part I, III, or IV, and Part V, line 1       33       X         34	07		26		
of any of these persons? If "Yes," complete Schedule L, Part III       27       X         28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV       28       X         29       Distributions for applicabiliting thresholds, conditions, and exceptions):       a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         20       C An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV       28a       X         20       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part IV       28a       X         21       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule R, Part I       30       X         23       Did the organization self, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule R, Part I       31       X         34       Was the organization nealed to any tax exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization nealed to any tax exempt or taxable entity? If "Yes," complete Schedule Complet	27				
28       Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):       28a       X         28       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         28       A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29a       X         20       Did the organization receive contributions of at, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       X         31       Did the organization ilquidate, terminate, or dissolve and cease operations?       31       X         32       Did the organization ilquidate, terminate, or dissolve and cease operations?       31       X         33       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       33       33         34       Was the organization neal extinking of section 512(b)(T3?       34       X         35e       Did the organization neal extinking or section 512(b)(T3?       34       X         35b       Did the organization nealexed oneany payment fro					77
instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director trustee, or key employee (or a family member thereof) was an officer, director trustee, or key employee (or a family member thereof) was an officer, director trustee, or key employee (or a family member thereof) was an officer, director trustee, or key employee (or a family member thereof) was an officer, director trustee, or key employee (or a family member thereof) was an officer, director trustee, or key employee (or a family member thereof) was an officer, director trustee, or key employee (or a family member thereof) was an officer, director trustee, or key employee (or a family member thereof) was an officer, director trustee, or key employee (or a family member thereof) was an officer, director trustee, or key employee (or a family member thereof) was an officer, director trustee, or key employee (or a family member thereof) was an officer, director trustee, or key employee (or a family member thereof) was an officer, director trustee, or key employee (or a family member thereof) was an officer, director trustee, or key employee (or a family member thereof) was an officer, director trustee, or key employee (or a family member thereof) was an officer, director trustee, or key employee (or a family member thereof) was an officer, director trustee, or key employee (or a family member thereof) was an officer, director trustee experiates, or culified conservation conservation comp			27	1096040	<b>A</b>
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28a       X         b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28b       X         c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule M       28c       X         29       Did the organization receive contributions of at, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of at, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule A, Part I       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations?       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule A, Part I       31       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 at 301.7701-3? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, Ine 1       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part V, Ine 2       35a       X         356       Section 501(C)(3) organization make any t	28				
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV       28b       X         c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or complete Schedule A, Part I     280     X         31       Ui the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule A, Part I       31       X         32       Did the organization own 100% of an entity disregarded as separate from the organization under Regulation assection 512(b)(13)?			100000	1994 S.	<u> </u>
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? // "Yes," complete Schedule L, Part V.       28       X         29 Did the organization receive more than \$25,000 in non-cash contributions? // "Yes," complete Schedule M       29       X         30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? // "Yes," complete Schedule M       30       X         31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? // "Yes," complete Schedule N, Part I       31       X         32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? // "Yes," complete Schedule N, Part I       31       X         33 Did the organization related to any tax-exempt or taxable entity? // "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       33       X         34 Was the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       X         35a Did the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       X         35b Id the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       X         36 Did the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       X         37 Did the organization complete Schedule R, Part					
director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV       28c       X         29       Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of at, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations?       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I       31       X         33       Did the organization realted to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       33       X         34       Was the organization neal de on sy tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       34       X         355       Did the organization. 512(b)(13)?       Be       X       X         366       X       If "Yes," complete Schedule R, Part V, line 2       36       X         37       Did the organization. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         38       M "Yes," complete Schedule R, Part V, line 2       36 <td< td=""><td></td><td></td><td></td><td></td><td><u> </u></td></td<>					<u> </u>
29       Did the organization receive more than \$25,000 in non-cash contributions? // "Yes," complete Schedule M       29       X         30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? // "Yes," complete Schedule M       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations?       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? // "Yes," complete       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? // "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? // "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       34       X         35a       Did the organization. Sold the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Bot the organization complete Schedule R, Part V, line 2       36a       X         37       Did the organization. Sold the organization make any transfers to an exempt non-charitable related organization?       36       X         38       Did the organization complete Schedule R, Part V, line 2       36       X	С				
30       Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? // **Yes, " complete Schedule M       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations?       31       30       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? // **Yes, * complete       31       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-32 and 301.7701-37 // **Yes, * complete Schedule R, Part I       32       X         34       Was the organization related to any tax-exempt or taxable entity? // **Yes, * complete Schedule R, Part I, III, or IV, and Part V, line 1       34       X         35a       Did the organization neceive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       37       X         37       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, line 2       36       X         37       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Sch		director, trustee, or direct or indirect owner? // "Yes," complete Schedule L, Part IV	<u>28c</u>	ļ	
contributions? // "Yes," complete Schedule M       30       X         31       Did the organization liquidate, terminate, or dissolve and cease operations?       31       X         32       Did the organization liquidate, terminate, or dissolve and cease operations?       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? // "Yes," complete       31       X         33       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? // "Yes," complete       32       X         34       Was the organization related to any tax-exempt or taxable entity? // "Yes," complete Schedule R, Part I       33       X         35a       Did the organization neated to any tax-exempt or taxable entity? // "Yes," complete Schedule R, Part II, III, or IV, and       34       X         35a       Did the organization neated to any tax-exempt or taxable entity? // "Yes," complete Schedule R, Part V, line 1       35a       34       X         35a       Did the organization neake acontrolled entity within the meaning of section 512(b)(13)?       35a       X       35a         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       37       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization       37<	29		29		X
31       Did the organization liquidate, terminate, or dissolve and cease operations?       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?       /// *Yes, * complete       32       X         33       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?       // *Yes, * complete       32       X         33       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?       // *Yes, * complete       32       X         34       Did the organization nown 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?       // * **** complete Schedule R, Part I       33       X         354       Was the organization related to any tax-exempt or taxable entity?       // ****** complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         355       Did the organization nave a controlled entity within the meaning of section 512(b)(13)?       Jit ************************************	30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
31       Did the organization liquidate, terminate, or dissolve and cease operations?       31       X         32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete       32       X         33       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete       32       X         34       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization nave a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes," complete Schedule R, Part V, line 2       35a       X         36       Section 501(c)(3) organization. Did the organization make any transfers to an exempt non-charitable related organization?       37       X         37       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         37       Statements Regarding Other		contributions? If "Yes," complete Schedule M	30		X
32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? // "Yes," complete       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? // "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? // "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is trated as a partnership for federal income tax purposes? // "Yes," complete Schedule R, Part V       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       37       X         39       Did the organization complete Schedule O.       38       X         9       Part V       Statements Regarding Other IRS Filings and Tax Compliance       38       X         9       Did the organization complete Schedule O.       1a       0       1a       0	31				
32       Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? // "Yes," complete       32       X         33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? // "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? // "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Was the organization ave a controlled entity within the meaning of section 512(b)(13)?       35a       X         37       Did the organization conduct more than 5% complete Schedule R, Part V, line 2       35b       36         38       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         39       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       37         31       Did the organization complete Schedule O       38       X         32       Note. All Form 990 filers are required to complete Schedule O       38       X         33       Did		If "Yes," complete Schedule N, Part I			X
33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> 33       X         34       Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> 34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       F" "Yes," to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization       35b       35b         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> 37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         Note. All Form 990 filers are required to complete Schedule O       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance         Check If Schedule O contains a response or note to any line in this Part V <td>32</td> <td>Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete</td> <td></td> <td></td> <td></td>	32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
33       Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I       33       X         34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transaction nor engage in any transaction organization?       35b       35b         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       36       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         39       Note. All Form 990 filers are required to complete Schedule O       38       X         9       Part W       Statements Regarding Other IRS Filings and Tax Compliance       1a       0         1a       Di       Di       Di		•	32		Х
34       Was the organization related to any tax-exempt or taxable entity? // "Yes," complete Schedule R, Part II, III, or IV, and       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes," to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?       35a       X         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V.       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         9       Note. All Form 990 filers are required to complete Schedule O       38       X         9       Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable       1a       0       1b       0         b       Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1a       0       1b       0       1a         c       Did the organization comply with backup withholding rules for reportable payme	33				
34       Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes," to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2       35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         9       Note. All Form 990 filers are required to complete Schedule O       Section 50 to 106. Enter -0 if not applicable       1a       0       38       X         1a       Enter the number of Forms W-2G included in line 1a. Enter -0 if not applicable       1a       0       1b       0       1b       0       1c         2       Did the organization comply with backup withholding rules for reportable payments to vendors and		sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R. Part I	33		Х
Part V, line 1       34       X         35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> 35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> 37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization gother IRS Filings and Tax Compliance       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       1       1       0         1a       Enter the number reported in Box 3 of Form 1096. Enter -0 if not applicable       1       1       0       1         b       Enter the number of Forms W-2G included in line 1a. Enter -0 if not applicable       1       0       1       0       1       0       1       <	34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R. Part II, III, or IV, and			
35a       Did the organization have a controlled entity within the meaning of section 512(b)(13)?       35a       X         b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? /// "Yes," complete Schedule R, Part V, line 2       35b       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? /// "Yes," complete Schedule R, Part V/       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         38       Did the organization Box 3 of Form 1096. Enter -0- if not applicable       1a       0       1b       0         1a       Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1a       0       1b       0         b       Enter the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       37       37			34		Х
b       If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35a				X
within the meaning of section 512(b)(13)? // "Yes," complete Schedule R, Part V, line 2       35b         36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization       36       X         38       Did the organization conduct more than 5% of its activities through an entity that is not a related organization       37       X         38       Did the organization complete Schedule Q and provide explanations in Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         Note. All Form 990 filers are required to complete Schedule O       Statements Regarding Other IRS Filings and Tax Compliance       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       Yes       No         Check if Schedule O contains a response or note to any line in this Part V       1       Yes       No         1a       Enter the number reported in Box 3 of Form 1096. Enter -0 if not applicable       1       1       0       1         b       Enter the number of Forms W-2G included in line 1a. Enter -0 if not applicable       1       0       1					
36       Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         9art V       Statements Regarding Other IRS Filings and Tax Compliance       38       X         Check if Schedule O contains a response or note to any line in this Part V       1       1       0         1a       Enter the number reported in Box 3 of Form 1096. Enter -0 if not applicable       1a       0       1       1         b       Enter the number of Forms W-2G included in line 1a. Enter -0 if not applicable       1b       0			35b		
If "Yes," complete Schedule R, Part V, line 2       36       X         37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         98       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         990       filers are required to complete Schedule O       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance       38       X         Check if Schedule O contains a response or note to any line in this Part V       1       1       0         1a       Enter the number reported in Box 3 of Form 1096. Enter -0 if not applicable       1a       1a       0       1b       0         b       Enter the number of Forms W-2G included in line 1a. Enter -0 if not applicable       1b       0       1b       0       1a         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportabl	36		•		
37       Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       37       X         38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?       38       X         Note. All Form 990 filers are required to complete Schedule O         Yes No         Part V       Statements Regarding Other IRS Filings and Tax Compliance         Check if Schedule O contains a response or note to any line in this Part V         1a       Enter the number reported in Box 3 of Form 1096. Enter -0 if not applicable         b       It my enter the number of Forms W-2G included in line 1a. Enter -0 if not applicable         c       It all 0         1a       Inter the number of Forms W-2G included in line 1a. Enter -0 if not applicable         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			1		X
and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> 37 X 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	37				
38       Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?         38       Note. All Form 990 filers are required to complete Schedule O         9       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V         1a       Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable         b       Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	07		37		x
Note. All Form 990 filers are required to complete Schedule O       38       X         Part V       Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V       Yes       No         1a       Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable       1a       0       Yes       No         b       Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1b       0       Image: Complete Schedule Schedul	38		·····  - <u></u>	<u> </u>	
Part V       Statements Regarding Other IRS Filings and Tax Compliance         Check if Schedule O contains a response or note to any line in this Part V         Yes No         1a       Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable       1a       0       1b       0         b       Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1b       0       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       27	00		39	x	
Check if Schedule O contains a response or note to any line in this Part V         Yes No         1a       1a         b       Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1a       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       1a	Pa	rt VI Statements Regarding Other IRS Filings and Tax Compliance	[ 00	<u> </u>	
1a Enter the number reported in Box 3 of Form 1096. Enter -0 if not applicable       1a       0       Yes       No         b Enter the number of Forms W-2G included in line 1a. Enter -0 if not applicable       1b       0       0       0         c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       0       0       0       0	<u>- 5.977</u> 7				
1a       Enter the number reported in Box 3 of Form 1096. Enter -0 if not applicable       1a       0         b       Enter the number of Forms W-2G included in line 1a. Enter -0 if not applicable       1b       0         c       Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       1a       0				Yee	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1b       0         c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       1	4	Enter the number reported in Roy 3 of Form 1006. Enter (), if not applicable	0 555	125	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			പ്		
	a		<b></b>		
	c	or the organization comply with backup withholding rules for repondble payments to vendors and reportable gaming (gambling) withing the second s	4.7	x	

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	North Central Accountable					
Form	990 (2018) Community of Health	82-	<u>1626</u>	178	Pa	age 5
Par	tV Statements Regarding Other IRS Filings and Tax Compliance (continued)					
					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	0	n veðsur Neved		100
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	1s?		2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions					
3a				3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule C			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a					
	financial account in a foreign country (such as a bank account, securities account, or other financial a			4a		Х
b	If "Yes," enter the name of the foreign country:	,				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	counts (FBAR).				
5a				5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transac			5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the					
οu	any contributions that were not tax deductible as charitable contributions?			6a		х
h	If "Yes," did the organization include with every solicitation an express statement that such contribution					
U U				6b		1
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).					
7	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the	navor2	7a		x
				7b		
		e required		10		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			70		x
	to file Form 8282?		• • • • • • • • • •	7c	- 63 - 63	
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	<u> </u>		- x+x0.4435),	- faraid'
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co			7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			<u>7f</u>		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza		38-C7	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the		11000	1996	
				8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.				ļ	
а	······································			<u>9a</u>		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	,		9b		1.02
10	Section 501(c)(7) organizations. Enter:	1 1				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				· ·.
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					- 2533
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
с	Enter the amount of reserves on hand	13c				
		L		14a	1	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul			14b	1	Τ
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune					Г
.0	excess parachute payment(s) during the year?			15		x
	If "Yes," see instructions and file Form 4720, Schedule N.		********			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	t income?		16	1	X
.0	if "Yes," complete Form 4720, Schedule O.		•••••		della.	100
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Form 990 (2018)

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#### North Central Accountable Community of Health

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI	******		X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 18			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	ARG.		
a		8a	Х	
b		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
ĩ	organization's mailing address? If "Yes." provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	1	·	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	· · · ·	X
b				
~	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a		11a	X	
b				
12a		12a	X	<b></b>
b		12b	x	
c				
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а		15a	X	
a b		15b	X	<u> </u>
5	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
104	taxable entity during the year?	16a	1	X
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
N	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	1 100		م مستحد مستعلم
	List the states with which a copy of this Form 990 is required to be filed  None			
17 18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A if applicable), 990, and 990 T (Section 501(c)(3))	sonlv	availa	ble
10	for public inspection. Indicate how you made these available. Check all that applicable), 550, and 5504 (Section 564(50))		arand	
	X       Own website       Another's website       X       Upon request       Other (explain in Schedule O)			
40	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan	cial	
19	statements available to the public during the tax year.			
00	State the name, address, and telephone number of the person who possesses the organization's books and records			
20	John Schapman - 509-886-6435			
	200 Valley Mall Parkway, East Wenatchee, WA 98802			

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Form 990 (2018)

North	Cent	ral	Accountabl	е
Commun	itv	of	Health	

#### Form 990 (2018)

Part VII	Compensation of Officers, I	Directors, Trustees,	Key Employees,	Highest Compensated
	Employees, and Independe	nt Contractors		

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average	(10		Pos	itior			Reportable	Reportable	Estimated
	hours per	box	, unle:	ss pe	rson	than is boti	n an	compensation	compensation	amount of
	week		ceran	id a d	irecto	or/trus	tee)	from	from related	other
	(list any	rector						the	organizations	compensation
	hours for	or di	89			ated		organization	(W-2/1099-MISC)	from the
	related organizations	ustee	trust		8	upens		(W-2/1099-MISC)		organization and related
	below	dual tr	tiona		nploy	stcor				organizations
	line)	individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizationo
(1) Barry Kling	2.50									
Board Chair		X						0.	0.	0.
(2) Richard Hourigan MD	2.00									
Vice Chair		X	•					0.	Ο.	0.
(3) Brooklyn Holton	2.00									
Board Treasurer		X						0.	0.	0.
(4) Judy Warnick	1.00									
Board Director		X						0.	0.	0.
(5) Michelle Price	1.00									
Board Director		X				<u> </u>		0.	0.	0.
(6) Bruce Buckles	0.50									
Board Director		X						0.	0.	0.
(7) Nancy Nash-Mendez	0.50									
Board Director		X			<u> </u>			0.	0.	0.
<pre>(8) Mike Beaver</pre>	0.50									
Board Director		X						0.	0.	0.
(9) Doug Wilson MD	0.50									
Board Director		X			L			0.	0.	0.
(10) Rosalinda Kibby	0.50				Ì					
Board Director		X						0.	0.	0.
(11) Scott Graham	0.50									
Board Director		X			L	<u> </u>		0.	0.	0.
(12) Carlene Anders	0.50									
Board Director		X		L				0.	0.	0.
(13) Dave Olson	0.50		]							
Board Director		X			ļ		<u> </u>	0.	0.	0.
(14) Andrea Davis	0.50									
Board Director		X			ļ		<u> </u>	0.	0.	0.
(15) Molly Morris	0.50									
Board Director		X						0.	0.	0.
(16) Ray Eickmeyer	0.50					1		_		
Board Director		X	ļ			<b>_</b>	<b> </b>	0.	0.	0.
(17) Kyle Kellum	0.50									_
Board Director	]	X	1					0.	0.	0.

North	Centra	al Acc	ountable
Commun	ity of	E Heal	th

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	ty of Hea	1t	h						82-1	6263	L78 Page 8
Part VII Section A. Officers, Directors, Tr	ustees, Key Em	ploy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)		
(A) Name and title	(B) Average hours per week (list any	(do box offi	not c	(C Posi heck / ss per nd a di	) ition nore son i	l than c s both	one an	(D) Reportable compensation from	<b>(E)</b> Reportable compensatic from related	n t	<b>(F)</b> Estimated amount of other
	hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MI		compensation from the organization and related organizations
(18) Theresa Sullivan	0.50										
Board Director		Х						0.		0.	0.
(19) Tim Hoekstra	0.50										
Board Director		X	ļ					0.		0.	0.
(20) Blake Edwards	1.00										
Board Secretary	- 1	X	ļ					0.		0.	0.
(21) Kevin Abel	1.00										
Former Vice Chair (22) Kayla Down		X						0.		0.	0.
Board Director	0.50	-									0
(23) Sheila Chilson	1.00	X	-					0.		0.	0.
Former Board Treasurer	1.00	x						0.		ο.	0.
(24) Tyler Paris	0.50							V•		<u> </u>	· · ·
Board Director		x						0.		0.	0.
(25) Linda Evans Parlette	40.00	1						<b>V</b> ·		<u> </u>	
Executive Director		1		X				0.		0.	0.
											·
1b Sub-total		•••••		•••••				0.		0.	0.
c Total from continuation sheets to Part								0.		0.	0.
<ul> <li>d Total (add lines 1b and 1c)</li> <li>2 Total number of individuals (including but</li> </ul>								1	000 of reportable		V•
compensation from the organization						,	010			~	C
											Yes No
3 Did the organization list any former offic			·			· ·		<b>v</b> ,			
line 1a? If "Yes," complete Schedule J fo											<u> </u>
4 For any individual listed on line 1a, is the									-		
and related organizations greater than \$											_4 X
5 Did any person listed on line 1a receive					-			-	ual for services		
rendered to the organization? If "Yes." c Section B. Independent Contractors	omolete Schedul	e J î	or si	icn r	pers	on					5 X
1 Complete this table for your five highest	compensated inc	lene	nde	nt co	ntra	actor	's th	nat received more than \$	100 000 of com	nensat	ion from
the organization. Report compensation f	•	•								pondu	
(A)								(B)			(C)
Name and busine								Description of s	ervices	С	ompensation
University of Washingto:	n										
1								Payments to		2	<u>,777,125.</u>
Chelan Douglas Health D	istrict							Contracted 1			
								administrati	ve host		819,166.
Community Choice								<b>D</b>			240 000
, The Center for Collabor	ation Ma	<u> </u>		<u>ل</u> ر ـــ				Payments to	partners		340,000.
The Center for Collabor	acion, MC	τJ	va		on	a					310 150
, Douglas Grant Lincoln a:	nd Okanoo	102	n	Ċ	um	+ + -	_	assistance f	or outp		312,150.
,	onunog	,	~ *		***	~ <u>-</u> -		Payments to j	partners	1	144,233.
2 Total number of independent contractor	s (includina but n	ot lir	nite	d to i	thos	se lis					,
\$100,000 of compensation from the org			2.		18		_,	,			

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	North Ce	ntral	Account	able
Form 990 (2018)	Communit	y of	Health	
Part VIII State	ment of Revenue			

<u> </u>		Check if Schedule O contains a response or note to	o any line	in this Dart VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 :         	, , , , , , , , , , , , , , , , , , , ,					
i i i i			2,500.				
N P	: 1	Noncash contributions included in lines 1a-1f;      Total. Add lines 1a-1f	<b>—</b>  -	19,738,982.			
<u> </u>	Ň	Busines					
Program Service Revenue							
"	1	All other program service revenue					
	3 4 5	Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties	►	98,147.		· · · · · · · · · · · · · · · · · · ·	98,147.
	6 1	(i) Real (ii) Per					
		D Less: rental expenses         C Rental income or (loss)         I Net rental income or (loss)	►				
		Gross amount from sales of (i) Securities (ii) O     assets other than inventory     Less: cost or other basis     and sales expenses	ther				
	(	Gain or (loss)					
Other Revenue		a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a					
ŧ	(	b Less: direct expenses	►				
		Part IV, line 19 a b b					
	10 i	A Gross sales of inventory, less returns     and allowances     Less: cost of goods sold     b					
		Miscellaneous Revenue Busines	s Code				
	11 :   		9	8,170.	8,170.		
	(	All other revenue	•	0 1 2 0		u de la companya de l	
	12	<ul> <li>Total. Add lines 11a-11d</li> <li>Total revenue. See instructions</li> </ul>	… ₿	8,170. 19,845,299.	8,170.	0.	98,147.

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# North Central Accountable Form 990 (2018) Community of Health Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons	e or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
a	Management				
b	Legal	2,157.		2,157.	
c	Accounting	3,720.		3,720.	
d	1			5,720.	
	Lobbying				
e	Professional fundraising services. See Part IV, line 17		in the second		
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	11,401.		11 401	
12	Advertising and promotion	17,969.		11,401.	
13	Office expenses	10,577.		17,969.	
14	Information technology	10,577.		10,577.	
15	Royalties				
16	Occupancy	21 450	10 000	10 100	
17	Travel	31,452.	18,270.	13,182.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	44 000			
19	Conferences, conventions, and meetings	41,233.	29,883.	11,350.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	5,530.	and the second state from the second state of the second state of the second state of the second state of the s	5,530.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount list line 24e exceede on Sebadule O				
~	amount, list line 24e expenses on Schedule 0.) Payments to partners	5,976,247.	5,976,247.	a na sang sa sana na sang sang sa	
	Payments to contractors	745,829.	745,829.	l . 	
b	Contracted labor	661,444.	246,054.	415,390.	·
بہ اب	Administrative hosting	157,722.	<u>240,034</u> ,	157,722.	
d				90,000.	
	All other expenses	90,000.	7 016 000		
25	Total functional expenses. Add lines 1 through 24e	7,755,281.	7,016,283.	738,998.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here 🕨 if following SOP 98-2 (ASC 958-720)				<b></b>

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		2018) Community of D Balance Sheet			0 2	1626178 Page 1
		Check if Schedule O contains a response or no	ote to any line in this Part X			
				(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		19,900.	1	13,107,371
	2	Savings and temporary cash investments		5,923,467.	2	4,926,014
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and				
		trustees, key employees, and highest compens	sated employees. Complete			
					5	
	6	Loans and other receivables from other disqua	lified persons (as defined under			
		section 4958(f)(1)), persons described in sectio	n 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sec	ction 501(c)(9) voluntary			
γ I		employees' beneficiary organizations (see instr	). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net			7	
۶	8	Inventories for sale or use			8	
	9				9	
1	l0a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a			
	b	Less: accumulated depreciation	10b		10c	
1	11	Investments - publicly traded securities			11	
1	2	Investments - other securities. See Part IV, line	11		12	
1	13	Investments · program-related. See Part IV, line	ə 11		13	
1	14	Intangible assets			14	
1	15	Other assets. See Part IV, line 11			15	
1	6	Total assets. Add lines 1 through 15 (must eg		5,943,367.	16	18,033,385
1	17	Accounts payable and accrued expenses			17	
1	8	Grants payable			18	
1	19	Deferred revenue			19	
2	20	Tax-exempt bond liabilities			20	
2	21	Escrow or custodial account liability. Complete	Part IV of Schedule D		21	
ທ   2	22	Loans and other payables to current and forme	er officers, directors, trustees,			
Ĕ		key employees, highest compensated employe	ees, and disqualified persons.		8,068	
Liabilities		Complete Part II of Schedule L			22	
2 2	23	Secured mortgages and notes payable to unre	1 (((((((((((((((((((((((((((((((((((((		23	
2	24	Unsecured notes and loans payable to unrelat			24	
2	25	Other liabilities (including federal income tax, p	•			
		parties, and other liabilities not included on lin				
					25	
2	26		·····	0.	26	0
		Organizations that follow SFAS 117 (ASC 98				
ŝ		complete lines 27 through 29, and lines 33 a			12862	
	27	Unrestricted net assets			27	
N Bal	28	Temporarily restricted net assets			28	
2 2	29	Permanently restricted net assets		29	l osta de tele tura de pala de televit	
Ī		Organizations that do not follow SFAS 117 (	ASC 958), check here 🕨 🔼			
ğ		and complete lines 30 through 34.		V	14-12-12	• • • • • • • • • • • • • • • • • • •
5   3	30	Capital stock or trust principal, or current fund	0.	30	0	
¥   3	31	Paid-in or capital surplus, or land, building, or		0.	31	
<u> </u>	32	Retained earnings, endowment, accumulated		5,943,367.	32	18,033,385
	33	Total net assets or fund balances		5,943,367.	33	18,033,385
1.0	34	Total liabilities and net assets/fund balances		5,943,367.	34	18,033,385

Form 990 (2018)

_	North Central Accountable	00 1	606170	_	10
	990 (2018) Community of Health t XI Reconciliation of Net Assets	02-1	626178	Pa	<u>je 12</u>
					<u> </u>
<u> </u>	Check if Schedule O contains a response or note to any line in this Part XI		•••••••••••••••••		<u> </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1	19,845	, 2	99.
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,755	, 2	81.
3	Revenue less expenses. Subtract line 2 from line 1	3	12,090	),0	18.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,943	, 3	67.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	18,033	,3	85.
Pa	t XII Financial Statements and Reporting				
<u> </u>	Check if Schedule O contains a response or note to any line in this Part XII				
			[	Yes	No
1	Accounting method used to prepare the Form 990: X Cash Cash Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э,	1000	69.040	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	See Adam	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				100.000
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		<u>2</u> c	N.N. 2015	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche			<u>dense</u>	linnisci I
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	•			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		L

Form 990 (2018)

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Department of Internal Reven	0 or 990-EZ) ( the Treasury we Service	C:	Public Cha pomplete if the organ 494 So Go to www.irs.gov	OMB No. 1545-0047 <b>2018</b> Open to Public Inspection							
Name of t	he organizatio			Accountable					identification number 2-1626178		
Part I	Community of Health 82										
1 2 3 4	A church, con A school desc A hospital or a A medical res city, and state	vention of ch cribed in sect a cooperative earch organiz a:	urches, or associatio ion 170(b)(1)(A)(ii). ( hospital service orga ation operated in cor	For lines 1 through 12, cl n of churches described Attach Schedule E (Forn anization described in <b>se</b> njunction with a hospital	in section 990 or 99 ection 170 described	n 170(b)(1 90-EZ).) (b)(1)(A)(ii in sectio	i). n 170(b)(1)(A)				
5 🛄				lege or university owned	or operat	ed by a go	vernmental u	nit describe	ed in		
6 7 X 8 9	A federal, stat An organizatio section 170(k A community An agricultura or university o	e, or local go on that norma b)(1)(A)(vi). (C trust describe I research org	Ily receives a substar omplete Part II.) ed in <b>section 170(b)(</b> ranization described	nental unit described in ntial part of its support fi (1)(A)(vi). (Complete Par in section 170(b)(1)(A)( ulture (see instructions).	rom a gove t II.) (x) operate	ernmental t ed in conju	unit or from th	land-grant	college		
10 11 12	activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4).										
a	lines 12a thro <b>Type I.</b> A support organization	ugh 12d that upporting orga ed organization. <b>You must o</b>	describes the type of inization operated, si on(s) the power to reg complete Part IV, Se		and comp by its supp majority c	plete lines ported orga of the direc	12e, 12f, and anization(s), ty tors or trustee	12g. /pically by es of the su	giving Ipporting		
	control or m organizatior	nanagement o n(s). <b>You mus</b>	f the supporting orga t complete Part IV,		ame perso	ns that cor	ntrol or manag	ge the supp	ported		
c [				g organization operated				ly integrate	d with,		
d	<b>Type III nor</b> that is not fi requirement	n-functionally unctionally int t (see instructi	r integrated. A supp egrated. The organiz ons). You must con	). You must complete I porting organization oper ation generally must sat nplete Part IV, Sections	ated in co isfy a distr A and D,	nnection w ibution req and Part 1	ith its suppor uirement and V.	an attentiv			
e [				written determination from nally integrated supporting			Type I, Type	II, Type III			
f Ente	r the number c			nany integrated supportin							
		• •	about the supporte						······		
	) Name of suppo organization		(ii) EiN	(iii) Type of organization (described on lines 1-10	in your governi		(v) Amount of support (see in	-	(vi) Amount of other support (see instructions)		
				above (see instructions))	Yes	No	, "	,			
				······							
	11 000.01001										
Total											

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#### North Central Accountable Schedule A (Form 990 or 990 EZ) 2018 Community of Health

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5	uppo	on sch	ear	lle t	or	Orga	aniz	ation	ns L	esc	ribe	a i	in Sections	317	r)(a)U	)(A)(I	v) an	d 1/	/u(b)(	1)(A	)(VI)		
(C	omple	ete only i	f you	ı che	cked	d the	box	on line	9 <mark>5</mark> , 7	', or 8	of F	Part	I or if the orga	anizat	tion fai	led to	qualify	unde	ər Part	111. lf	the or	ganizat	ion

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fails to qualify under the tests listed below, please complete Part III.)

Part II

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")				6000000.	19738982.	25738982.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3				6000000.	19738982.	25738982
	The portion of total contributions						
-	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from tine 4.						25738982.
	ction B. Total Support	· · · · · · · · · · · · · · · · · · ·			•••		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 4				6000000.	19738982.	25738982.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources				21,138.	98,147.	119,285.
9	Net income from unrelated business			· · · · · · · · · · · · · · · · · · ·			
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	[					
11	Total support. Add lines 7 through 10						25858267.
	Gross receipts from related activities,	etc. (see instructic	ons)			12	8,170.
	First five years. If the Form 990 is for						
	organization, check this box and stor	ohere					► X
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2018 (I	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	%
15	Public support percentage from 2017	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2018. If the d	organization did no	t check the box or	n line 13, and line <sup>-</sup>	14 is 33 1/3% or m	ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				
b	33 1/3% support test - 2017. If the o	organization did no	t check a box on l	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test	•					•
	and if the organization meets the "fac	sts-and-circumstand	ces" test, check th	is box and <b>stop</b> h	nere. Explain in Pa	rt VI how the orga	nization
	meets the "facts-and-circumstances"	test. The organizat	tion qualifies as a p	oublicly supported	organization		►
b	10% -facts-and-circumstances test	: - 2017. If the org	anization did not o	heck a box on line	e 13, 16a, 16b, or 1	17a, and line 15 is	10% or
	more, and if the organization meets the	ne "facts-and-circur	mstances" test, ch	eck this box and	stop here. Explain	n in Part VI how th	9
	organization meets the "facts-and-circ	cumstances" test. "	The organization q	ualifies as a public	ly supported orga	nization	
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17t	o, check this box a	nd see instruction	<u>s</u>

Schedule A (Form 990 or 990-EZ) 2018

#### Schedule A (Form 990 or 990 EZ) 2018 Community of Health Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	► (a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and						······································
membership fees received. (Do no	st l					
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpos				_		
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to	1					
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit	to					
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, ai						
3 received from disqualified perso						
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6	) States and the second se					
Section B. Total Support						
Calendar year (or fiscal year beginning in)		(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest,						
dividends, payments received on securities loans, rents, royalties,						
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from business	ses					
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated busine	····					
activities not included in line 10b,	~					
whether or not the business is						
regularly carried on 12 Other income. Do not include gair	···					
or loss from the sale of capital						
assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 1						
14 First five years. If the Form 990 is	s for the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a sectio	on 501(c)(3) organiza	ation,
check this box and stop here						
Section C. Computation of PL	ublic Support Per	rcentage			· · · · · · · · · · · · · · · · · · ·	
15 Public support percentage for 201	18 (line 8, column (f), c	iivided by line 13,	column (f))		15	%
16 Public support percentage from 2					16	%
Section D. Computation of In-	vestment Income	e Percentage				
17 Investment income percentage fo	r 2018 (line 10c, colu	mn (f), divided by I	ine 13, column (f))		17	%
18 Investment income percentage fro	om 2017 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2018. If						
more than 33 1/3%, check this bo						
b 33 1/3% support tests - 2017. If						nd
line 18 is not more than 33 1/3%,						
20 Private foundation. If the organiz			-		-	

Schedule A (Form 990 or 990-EZ) 2018

#### North Central Accountable Schedule A (Form 990 or 990 EZ) 2018 Community of Health

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За

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10h

Yes

No

#### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below.* 
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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		82-1626178	Pa	ge 5
Par	t IV Supporting Organizations (continued)		,	
		N	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	<u>11a</u>		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. tion B. Type I Supporting Organizations	110		
360	don B. Type i Supporting Organizations		Yes	
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		res	No
1	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations	· · · ·		
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed		4979) 19	
	the supported organization(s).			
Sec	tion D. All Type III Supporting Organizations		r	
		Tresser trade and th	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	dik siya d	N HAR	in the second
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	De por la sector	-1. c.t.	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
~	the organization maintained a close and continuous working relationship with the supported organization(s).	2	<u> (5.5</u>	
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	structions).		
а	The organization satisfied the Activities Test. Complete line 2 below.	,		
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
с	The organization supported a governmental entity. Describe in Part VI how you supported a government entity	ty (see instructions),		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these		80.93	<u>daal</u>
	activities but for the organization's involvement.	2b	5,511	
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	• • • • • • • • • • • • •	- <u></u>		
	trustees of each of the supported organizations? <i>Provide details in</i> <b>Part VI.</b>	<b>3a</b>	-1994 - 1994 - 1	
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		L

North Central Accountable
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#### Schedule A (Form 990 or 990 EZ) 2018 Community of Health Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Part V Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All 1 other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year (A) Prior Year Section A - Adjusted Net Income (optional) 1 Net short-term capital gain 1 2 2 Recoveries of prior-year distributions 3 3 Other gross income (see instructions) 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or 6 collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 7 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year (A) Prior Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see 1 instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a b Average monthly cash balances 1b 1c c Fair market value of other non-exempt-use assets 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, 4 see instructions) 4 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 5 6 Multiply line 5 by .035 6 Recoveries of prior-year distributions 7 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Current Year Section C - Distributable Amount 1 Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 2 Enter 85% of line 1 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 3 Enter greater of line 2 or line 3 4 4 5 Income tax imposed in prior year 5 Distributable Amount. Subtract line 5 from line 4, unless subject to 6 6 emergency temporary reduction (see instructions) Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see 7

Schedule A (Form 990 or 990-EZ) 2018

instructions).

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ection D - Distributions			Current Year
1 Amounts paid to supported organizations to accomplish exe			
2 Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
organizations, in excess of income from activity			
3 Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval required)			
6 Other distributions (describe in Part VI). See instructions.			
7 Total annual distributions. Add lines 1 through 6.			
8 Distributions to attentive supported organizations to which the	he organization is responsive		
(provide details in Part VI). See instructions.			
9 Distributable amount for 2018 from Section C, line 6			
0 Line 8 amount divided by line 9 amount			
ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reason-			
able cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D,			
line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			an inclusion of the second
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if			
any. Subtract lines 3g and 4a from line 2. For result greater			
than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h			
and 4b from line 1. For result greater than zero, explain in			
Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7;			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			<u>n andre and the Andrea States and Andrea</u> Na angles angles and angles and an angles

Schedule A (Form 990 or 990-EZ) 2018

	North C (Form 990 or 990 EZ) 2018 Communi	entral Accountable	82-1626178 Page 8
Part VI	Supplemental Information. Prov Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4 line 1; Part IV, Section D, lines 2 and 3; P	ide the explanations required by Part II, line 10; Part II, line 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, art IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1 Section E, lines 2, 5, and 6. Also complete this part for any	17a or 17b; Part III, line 12; lines 1 and 2; Part IV, Section C, ; Part V, Section B, line 1e; Part V,
	·		
<u>.</u>			
		····	······
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			·····
· ····			

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

## Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

Employer identification number

Name	of the	organization
INALLIE	OF LED	organization

Organization type (check one):

ganadation							
N	orth	Centi	ral	Acco	ounta	able	
C	ommun	ity d	of H	Ieal	th		

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Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### **General Rule**

**X** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### **Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of crueity to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

	3 (Form 990, 990 EZ, or 990 PF) (2018)		T	Page 2
Name of o	rganization Central Accountable		Emplo	yer identification number
	nity of Health		82	-1626178
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
	Washington State Health Care Authority 626 8th Ave SE	\$ <u>19,736,4</u>	82.	Person X Payroli Noncash (Complete Part II for
	Olympia, WA 98501			noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ns	(d) Type of contribution
		\$		Person Payroli Payroli Payroli Payroli Part Il for (Complete Part Il for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ins	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ons	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ons	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	ons	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions.)

ne of org rth	ganization Central Accountable	E	mployer identification numbe
	ity of Health		82-1626178
art II	Noncash Property (see instructions). Use duplicate copies of Pa	rt II if additional space is needed.	
(a) No. rom art i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom 'art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part l	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

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Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Schedule I	B (Form 990, 990-EZ, or 990-PF) (2018)			Page 4					
	organization			Employer identification number					
	Central Accountable								
	nity of Health			82-1626178					
Part III		us to organizations described in secti	on 501(c)(7) (8) or (10) t						
rait in	from any one contributor. Complete columns (a)	through (e) and the following line entry	For organizations						
	completing Part II), enter the total of exclusively religious, c	naritable, etc., contributions of \$1,000 or les	s for the year, (Enter this info, ond	.e.) ► \$					
	Use duplicate copies of Part III if additional s	pace is needed.							
(a) No.	(1) B		(4) Dans	wintion of how off is hold					
from Part I	(b) Purpose of gift	(c) Use of gift	(a) Desc	cription of how gift is held					
				NINGANO ( )					
		(e) Transfer of gift							
	Transferee's name, address, an	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
				nr					
(a) No.									
from	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held					
Part I		· · · · · · · · · · · · · · · · · · ·							
		••••••••••••••••••••••••••••••••••••••							
		•••••							
	(a) Transfor of sitt								
	(e) Transfer of gift								
	Transferee's name, address, an		Relationship of transferor to transferee						
				,					
(a) No.				· · · · · · · · · · · · · · · · · · ·					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held					
		· · · · · · · · · · · · · · · · · · ·							
				· · · · · · · · · · · · · · · · · · ·					
		(e) Transfer of gift							
	Transferee's name, address, ar	d ZIP + 4	Relationship of tra	insferor to transferee					
				······································					
(a) M-	[								
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Dee	cription of how gift is held					
Part I			(, = 00						
				, ,					
			[						
		(a) Tapantan at all							
		(e) Transfer of gift							
	Transferee's name, address, ar	1 d ZIP + 4	Relationship of tra	ansferor to transferee					
		1							
		······································							

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SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service Department Service Department of the Treasury Internal Revenue Service Mathematical Service Service Mathematical Service Mathematical Service Mathe	OMB No. 1545-0047 <b>2018</b> Open to Public Inspection				
	dentification number				
Form 990, Part I, Line 1, Description of Organization Mission: people who live in them, improve health care access, quality, the					
experience of care, and lower per capita health care costs in the					
Central region, which includes Chelan, Douglas, Grant, and Okanogan					
counties (the "North Central Regional Service Area").					
Form 990, Part III, Line 1, Description of Organization Mission:					
Douglas, Grant, and Okanogan counties (the "North Central Regiona	1				
Service Area").					
Form 990, Part VI, Section B, line 11b:					
The 990 form was made available to NCACH governing board members	prior to				
filing the form.					
Form 000 Doub VT Cortice D. Line 10-					
Form 990, Part VI, Section B, Line 12c:					
At every governing board meeting, NCACH routinely asks for member	rs to				
disclose any conflict of interest pertaining to the materials lis	sted in the				
board agenda. Annually, NCACH staff sends out the conflict of int	cerest				
policy and asks board members to provide updated details on any c	conflicts				
they may have over the course of the new year.					
Form 990, Part VI, Section B, Line 15:					
NCACH does not have any paid officers or key employees.	·				
Form 990, Part VI, Section C, Line 19:					

NCACH has all governing board and workgroup documents posted publicly on

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Schedule O (Form 990 or 990-EZ) (2018) Name of the organization North Central Accountable	Page 2
Name of the organization North Central Accountable Community of Health	Employer identification number 82–1626178
the ncach.org webpage. Documents are sent out prior to mee	tings for all
partners to see. Financial statements are posted as part o	f the meeting
documents on the webpage and shared at the open meetings o	f the governing
Board. NCACH posts the conflict of interest policy on the	ncach.org webpage
under the governing board section.	
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(Rev. January 2019)

## Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

				Enter file	er's identifyir	ng number	
Type or	or Name of exempt organization or other filer, see instructions.			Employe	Employer identification number (EIN) or		
print	North Central Accountable						
File by the	Community of Health		· · · · · · · · · · · · · · · · · · ·		82-1626178		
due date for filing your return. See	te for Number, street, and room or suite no. If a P.O. box, see instructions,		Social se	ocial security number (SSN)			
instructions.							
Enter the	Return Code for the return that this application is for (file	a separa	te application for each return)			01	
Applicati		Return				Return	
Is For		Code	Is For			Code	
Form 990 or Form 990-EZ		01	Form 990-T (corporation)			07	
Form 990-BL		02	Form 1041-A			08	
Form 4720 (individual)		03	Form 4720 (other than individual)	09			
Form 990-PF 04 Form 5227						10	
Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069						11	
Form 990	-T (trust other than above)	06	Form 8870			12	
	John Schapman						
<ul> <li>The bo</li> </ul>	ooks are in the care of 🕨 200 Valley Mall	. Park	<u> way - East Wenatch</u>	.ee, V	VA 98802	2	
	one No.  509-886-6435		Fax No. 🕨				
<ul> <li>If the c</li> </ul>	rganization does not have an office or place of business	in the Uni	ited States, check this box			►	
• If this i	s for a Group Return, enter the organization's four digit (	Group Exe	mption Number (GEN)	f this is fo	r the whole g	oup, check this	
box 🕨	. If it is for part of the group, check this box 🕨	and atta	ch a list with the names and EINs of	all memb	ers the extens	sion is for.	
	I request an automatic 6-month extension of time until November 15, 2019, to file the exempt organization return for						
	the organization named above. The extension is for the organization's return for:						
	tax year beginning, and ending						
<b>P</b> L		, an	a ending		<u> </u>		
2 If th	e tax year entered in line 1 is for less than 12 months, ch Change in accounting period	neck reasc	on:	<sup>=</sup> inal retur	n		
L							
3a If th	is application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less				
any	nonrefundable credits. See instructions.			3a	\$	Ο.	
b If th	is application is for Forms 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and				
	estimated tax payments made. Include any prior year overpayment allowed as a credit.			Зb	\$	Ο.	
c Balance due, Subtract line 3b from line 3a. Include your p		yment with	n this form, if required, by				
usir	g EFTPS (Electronic Federal Tax Payment System). See	Instructio	ns.	3c	\$	0.	
Caution: instructior	If you are going to make an electronic funds withdrawal ns.	(direct det	bit) with this Form 8868, see Form 84	.53∙EO an	d Form 8879-	EO for payment	
LHA F	or Privacy Act and Paperwork Reduction Act Notice,	see instru	ctions.		Form 88	368 (Rev. 1-2019)	